	NOTE:						<u> </u>	SECTAL:					2.11.43	
	MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								APPLICANTED				DATE	
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101			 _	1.7	Hap.	Der.	1	151	IND.	DEP.	IND.	DEP		
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TOTAL		1		-	-		-	200				-3.5	100	day.
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TOTAL	100	←	Dest	€ . .	180		L	DEP.		<u> </u>	1.3	«		4
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		.—			•			***	1420	Drava				

BEST AVAILABLE COPY

SEST AVAILABLE COPY

	FEE CA	E DEPENDER ALCULATION SE WITH FORM I	NT CLAIM SHEET	APPLICA	19727 io. nt(s)	FILING D	ATE
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	SE WITH FURM I					
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19	<i>[</i> 5]	<i> </i>		69	13		$oldsymbol{\perp}$
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OTAL LAIMS		50	(section)	TOTAL CLAIMS			
· · · · ·		*MAY E	BE USED FOR ADDITIONA	L CLAIMS OI	R ADMENDMENTS		